

Carella, Byrne, Bain & Gilfillan
CLIENT/MATTER DATA FORM

Side One

Instructions: Client: New, change, etc. - Use Side One Matter: New, change, etc. - Use Side Two		Date <u>2/11/90</u> Prepared By <u>CS</u> Entered By _____		
CHECK ONE		CHECK ONE		
<input type="checkbox"/> Client <input type="checkbox"/> Non-Billable <input checked="" type="checkbox"/> Matter	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Close	<input type="checkbox"/> Change <input type="checkbox"/> Reopen	<input type="checkbox"/> Delete <input type="checkbox"/> Activate	<input type="checkbox"/> Transfer <input type="checkbox"/> Inactive

CLIENT/NON-BILLABLE - To ADD or CHANGE

Client # _____ Client Name _____

Date Opened _____ Group _____ Rate _____

Lawyer Responsible _____ Assigned _____ Originating _____

Billing Cycle _____ 1. monthly 3. semi-annual
2. quarterly 4. annual Month to Bill _____ Statement Format _____

Contact _____ and _____
Telephone Number _____ Industry _____

Charge Interest _____ Reminder Statement _____ Client Address _____

Name and Address _____

CLIENT/NON-BILLABLE - To CLOSE, REOPEN, TRANSFER, or DELETE

Client # _____ Client Name _____

Close _____ Open _____

Transfer _____ Client _____

To Client _____ Client # _____ Name _____

Delete _____ Effective Date _____

Ruben EXHIBIT #46

BEST AVAILABLE COPY

Carella, Byrne, Bain & Gilfillan

CLIENT/MATTER DATA FORM

Side One

Instructions:
 Client: New, change, etc. - Use Side One
 Matter: New, change, etc. - Use Side Two

Date 2/19/80
 Prepared By JK
 Entered By _____

CHECK ONE		CHECK ONE			
<input type="checkbox"/> Client	<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Change	<input type="checkbox"/> Delete	<input type="checkbox"/> Transfer	
<input type="checkbox"/> Non-Billable	<input type="checkbox"/> Close	<input type="checkbox"/> Reason	<input type="checkbox"/> Activate	<input type="checkbox"/> Inactive	
<input checked="" type="checkbox"/> Matter					

CLIENT/NON-BILLABLE - To ADD or CHANGE

Client # _____ Client Name _____

Date Opened _____ Group _____ Rate _____

Lawyer Responsible _____ Assigned _____ Originating _____

Billing Cycle _____ 1. monthly 3. semi-annual
 2. quarterly 4. annual Month to Bill _____ Statement Format _____

Contact _____ Industry _____
 and Telephone Number _____

Charge Interest _____ Reminder Statement _____ Client Address _____

Name and Address _____

CLIENT/NON-BILLABLE - To CLOSE, REOPEN, TRANSFER, or DELETE

Client # _____ Client Name _____

Close _____ Open _____

Transfer _____ Client # _____ Name _____
 To Client _____ Client # _____ Name _____
 Delete _____ Effective Date _____

Ruben EXHIBIT 2046
 Ruben v. Wiley et al.
 Interference No. 105,077
 RX 2046

Carella, Byrne, Bain & Gilfillan

CLIENT/MATTER DATA FORM

Side One

BEST AVAILABLE COPY

Instructions:
 Client: New, change, etc.—Use Side One
 Matter: New, change, etc.—Use Side Two

Date 2/1/96
 Prepared By CC
 Entered By _____

CHECK ONE		CHECK ONE				
<input type="checkbox"/> Client	<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Change	<input type="checkbox"/> Delete	<input type="checkbox"/> Transfer		
<input type="checkbox"/> Non-Billable	<input type="checkbox"/> Close	<input type="checkbox"/> Reopen	<input type="checkbox"/> Activate	<input type="checkbox"/> Inactive		
<input checked="" type="checkbox"/> Matter						

CLIENT/NON-BILLABLE—To ADD or CHANGE

Client # _____ Client Name _____

Date Opened _____ Group _____ Rate _____

Lawyer Responsible _____ Assigned _____ Originating _____

1. monthly 3. semi-annual
 Billing Cycle _____ 2. quarterly 4. annual Month to Bill _____ Statement Format _____

Contact _____ and _____ Industry _____
 Telephone Number _____

Charge Interest _____ Reminder Statement _____ Client Address _____

Name and Address _____

CLIENT/NON-BILLABLE—To CLOSE, REOPEN, TRANSFER, or DELETE

Client # _____ Client Name _____

Close _____ Open _____

Transfer _____ Client _____
 To Client _____ Client # _____ Name _____

Delete _____ Effective Date _____

Carella, Byrne, Bain & Gilfillan
CLIENT/MATTER DATA FORM

Side Two

BEST AVAILABLE COPY

MATTER - To ADD or CHANGE

Client # 325800 Client Name Human Genome Science
Matter # 548 Matter Name (Prov) FAS Ligands (PF261)
Date Opened 1/1/96 Amount _____ Office _____
Review Date _____ C/R PI Dept. _____
Review Date _____ Lawyer Responsible 58EMU
Matter 9T Lawyer Assigned 120 GDF
Type _____
Reference _____ Rate _____
Billing Cycle _____ 1 monthly 3 semi-annual Month to _____ Statement _____
2 quarterly 4 annual Bill _____ Format _____
Type _____ Description _____
Access Address (if different from client) _____

MATTER - To CLOSE, REOPEN, TRANSFER or DELETE

Client # _____ Client Name _____
Matter # _____ Matter Name _____
Close Matter Reopen Matter Transfer Matter
TRANSFER TO:
Client # _____ Client Name _____
Matter # _____ Matter Name _____
Delete Matter Effective Date _____
Date to Destroy _____ Archives _____ Date Closed _____

TYPE OF FILE

Red Expanding _____ Brown Folder & Correspondence _____
Patent Folder Litigation Folder (Pleading Boards, Coms, etc.) _____
Special Instructions _____

Requested by (Attorney) GDF Return to ZAC